Please type a plus sign (+) inside this box	Attorney Docket	No.	BIQ-5015 NP		
PATENT APPLICATION	First Inventor		KEIDAR		
TRANSMITTAL	Title		ABLATION DEVICE WITH SPIRAL ARRAY ULTRASOUND TRANSDUCER		
(only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Lat		120.000.000		
APPLICATION ELEMENTS		ADD	DRESS TO: Mail Stop Patent Application		
See MPEP Chapter 600 concerning utility patent appropriately.	olication		Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		
1. Fee Transmittal Form (e.g., PTO			CD-ROM or CD-R in duplicate, large table or		
(submit an original and a duplicate for fee p		Con	Computer Program (Appendix)		
 2. ☐ Applicant claims small entity status. 3. ☒ Specification [Total Pages 50] (Preferred arrangement set forth below) - Descriptive Title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. ☒ Drawing(s)(35 USC 113) [Total Sheets 12] 5. Oath or Declaration [Total Pages 3] a. ☒ Newly executed (original or copy) b. ☐ Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. ☐ DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 		8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of Attorney (when there is an assignee) 11. English Translation Document (if applicable) 12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Request and Certifications under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.			
6. Application Data Sheet. See 37		<u></u>			
preliminary amendment, or in an Application Continuation Divisional Continuation Prior application information: Examiner For CONTINUATION or DIVISIONAL APP oath or declaration is supplied under Box 5 continuation or divisional application and is relied upon when a portion has been inady	ation Data Sheet uation-in-Part (C Group S only: The en 5b, is considere s hereby incorp vertently omitted CORRESPOND	t under CIP) of Art Unitire dis ed a pa orated d from DENCE	of prior application No.: , filed Jnit: isclosure of the prior application, from which an art of the disclosure of the accompanying by reference. The incorporation can only be the submitted application parts.		
Name: Philip S. Johnson, Esq.		<u> </u>			
ddress: Johnson & Johnson					
One Johnson & Johnson	n Diazo				

Please direct all telephone calls or telefaxes to Vincent J. Serrao at:

Fax: (732) 524-2808 21. SIGNATURE OF APPLICANT ATTORNEY, OR AGENT REQUIRED

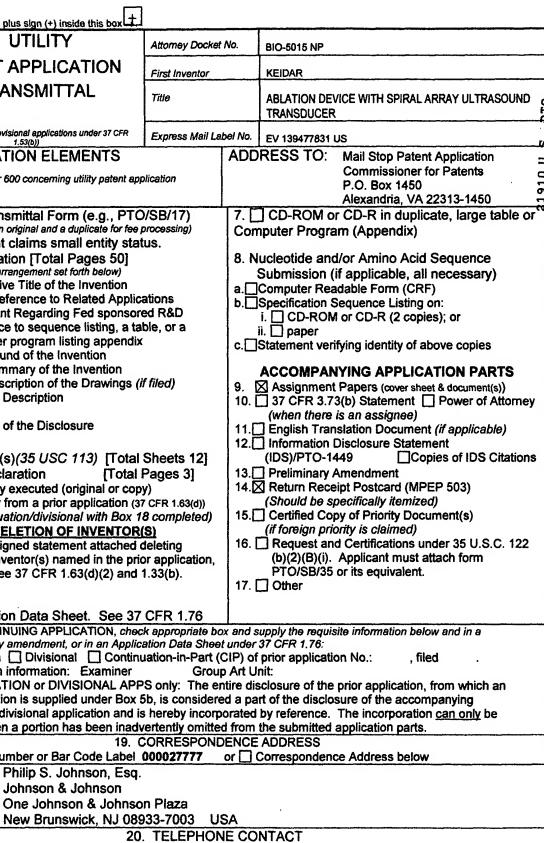
(732) 524-1163

Vincent J. Serrao

July 21, 2003

Telephone:

NAME **SIGNATURE** DATE



Reg. No. 47,072

FEE TRANSMITTAL Filing Date First Named Inventor Group Art Unit Examiner Name Application Number Filing Date July 21, 2003 First Named Inventor Yaron KEIDAR Group Art Unit Examiner Name Attorn y Dock t Number BIO-5015NP

FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$750.00
TOTAL CLAIMS	20 - 20 =	0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	5 - 3 =	2	x 84.00	\$ 168.00
MULTIPLE DEPENDENT CLAIMS		N/A	\$280.00	
			TOTAL FEES	\$ 918.00

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/BIO-5015/VJS in the amount of \$918.00. Three copies of this sheet are enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/BIO-5015/VJS. Three copies of this sheet are enclosed.

SUBMITTED B	Complete (if applicable)		
Typed or			
Printed Name	Vincentyl. Serrao	Reg. No. 47,072	
Signature	4/4/1	Date: July 21, 2003	Deposit Account No. 10-0750

DOCKET NO. BIO-5015

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: KEIDAR

For : ABLATION DEVICE WITH SPIRAL ARRAY ULTRASOUND

TRANSDUCER

Express Mail Certificate

"Express Mail" mailing number: EV 139477831 US

Date of Deposit: July 21, 2003

I hereby certify that this complete application, including specification pages, claims, informal drawings, Declaration and Power of Attorney, and Assignment, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

(Typed or printed name of person mailing paper or fee

(Signature of person mailing paper or fee)